Fill	I in this information to identify your case:	Filad 01/	1079 A L	ntoroc		Check one bo	x only as directed in thi			
_						Form 122A-13	Supp:			
D	Ayanna         Amirah           First Name         Middle Name	Abdullah Last Name				<b>1</b> 1. There is	no presumption of abu	se.		
	Pebtor 2 Spouse, if filing) First Name Middle Name	Last Name				of abuse a	culation to determine if a pplies will be made und at Calculation (Official F	er Chapter 7		
	Inited States Bankruptcy Court for the: Easte	ern District of	Pennsylvani				•	,		
	tase number 23-13816	em District or	r cinisyivanii	4	-		ans Test does not apply I military service but it c			
_	f known)					☑ Check if the	nis is an amended filing			
 ∩f	ficial Form 122A-1						_			
		Curron	+ N/an+	ا براط	n 0 0 1	<b>~</b> 0				
ा	napter 7 Statement of Your	Curren	t MOH	ппу п	IICOI	пе		12/19		
and beca vith	ch a separate sheet to this form. Include the line number case number (if known). If you believe that you are exemause of qualifying military service, complete and file States this form.  Int 1: Calculate Your Current Monthly Income	npted from a p	resumption	of abuse b	oecause	you do not ha	ave primarily consume	r debts or		
1.	What is your marital and filing status? Check one only.									
	Not married. Fill out Column A, lines 2-11.									
	Married and your spouse is filing with you. Fill out bo			2-11.						
	☐ Married and your spouse is NOT filing with you. You and your spouse are:									
	Living in the same household and are not legally separated. Fill out both Column A and B, lines 2-11.  Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare									
	under penalty of perjury that you and your spous spouse are living apart for reasons that do not in	se are legally s	eparated und	er nonbar	nkruptcy	law that applie	es or that you and your			
10 va ex	ill in the average monthly income that you received from 01(10A). For example, if you are filing on September 15, the aried during the 6 months, add the income for all 6 months xample, if both spouses own the same rental property, put 0 in the space.	ne 6-month per and divide the	riod would be total by 6. F	March 1 t	hrough <i>i</i> sult. Do	August 31. If the not include and only. If you have	ne amount of your mont by income amount more	hly income than once. For		
					Debte		Debtor 2 or non-filing spouse			
2.	<ol> <li>Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).</li> </ol>					\$5,102.06				
3.	B. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.					\$0.00				
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.					\$1,038.00				
5.	Net income from operating a business, profession, or farm	Debtor 1	Debtor 2							
	Gross receipts (before all deductions)	\$0.00								
	Ordinary and necessary operating expenses	- \$0.00								
	Net monthly income from a business, profession, or farm	\$0.00		Copy here →		\$0.00				
6.	Net income from rental and other real property	Debtor 1	Debtor 2							
	Gross receipts (before all deductions)	\$0.00	Debioi 2							
	Ordinary and necessary operating expenses	- \$0.00	-							
		\$0.00		Сору						
	Net monthly income from rental or other real property	Ψ0.00		here →		\$0.00				
7.	Interest, dividends, and royalties					\$0.00				
-	A COLOR OF THE ACT OF									

Debtor 1

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			Column A Debtor 1	Column B Debtor 2 or non-filing spouse			
	8. Unemployment compensation		\$0.00				
	Do not enter the amount if you contend that the a under	amount received was a benefit					
	the Social Security Act. Instead, list it here:						
	For you	\$0.00					
	For your spouse	·····					
	9. Pension or retirement income. Do not include a benefit under the Social Security Act. Also, excedo not include any compensation, pension, pay, United States Government in connection with a disability, or death of a member of the uniformed retired pay paid under chapter 61 of title 10, ther that it does not exceed the amount of retired pay entitled if retired under any provision of title 10 or	or as stated in the next sentence, annuity, or allowance paid by the disability, combat-related injury or services. If you received any include that pay only to the extent to which you would otherwise be	\$0.00				
	10. Income from all other sources not listed above Do not include any benefits received under the received as a victim of a war crime, a crime aga domestic terrorism; or compensation, pension, the United States Government in connection within injury or disability, or death of a member of the list other sources on a separate page and put the	Social Security Act; payments ninst humanity, or international or pay, annuity, or allowance paid by th a disability, combat-related uniformed services. If necessary,					
	2022 Tax Refund						
	Total amounts from separate pages, if any.  11. Calculate your total current monthly income. A each column. Then add the total for Column A to		\$6,234.06	+	= \$6,234.06  Total current monthly income		
Pa	art 2: Determine Whether the Means Test Ap	oplies to You					
12.	Calculate your current monthly income for the year.	Follow these steps:					
	12a. Copy your total current monthly income from line	e 11		Copy line 11 here →	\$6,234.06		
	Multiply by 12 (the number of months in a year)				<b>x</b> 12		
	12b. The result is your annual income for this part of	2b. The result is your annual income for this part of the form.			\$74,808.72		
13.	Calculate the median family income that applies to y	ou. Follow these steps:					
	Fill in the state in which you live.	Pennsylvania					
	Fill in the number of people in your household.	3					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go instructions for this form. This list may also be available	online using the link specified in the	e separate	13. [	\$99,093.00		
14.							
	14a. Line 12b is less than or equal to line 13. On the Go to Part 3. Do NOT fill out or file Official Fol	use.					
	14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2.</i> Go to Part 3 and fill out Form 122A–2.						

Debtor 1

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Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Ayanna Amirah Abdullah

Signature of Debtor 1

Date 01/08/2024

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.